

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	3739
Title::	EMG Electrode Apparatus And Positioning System
Attorney Docket Number::	FDT-002 DIV4
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	50
Total Drawing Sheets::	35
Small Entity::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Mark
Middle Name::	T.
Family Name::	Finneran
Name Suffix::	
City of Residence::	Wooster
State or Province Of Residence::	OH
Country of Residence::	US
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City of mailing address::	Wooster
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44691

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
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Middle Name:: E.
Family Name:: Alexander
Name Suffix::
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State or Province Of Residence:: OH
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Country of mailing address:: US
Postal or Zip Code of mailing address:: 43214

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	B.
Middle Name::	Russell
Family Name::	Alexander
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Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Charles
Middle Name::	E.
Family Name::	Wickham, Jr.
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Country of mailing address::	US
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Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Richard
Middle Name:: L.
Family Name:: Hitchcock
Name Suffix::
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State or Province Of Residence:: OH
Country of Residence:: US
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State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 43123

Inventor Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Scott
Middle Name::	D.
Family Name::	Howard
Name Suffix::	
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State or Province Of Residence::	OH
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City of mailing address::	Galloway
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	43119

Correspondence Information

Correspondence Customer Number:: 07733

Representative Information

Representative Customer Number::	07733
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/806,632	04/02/2001
09/806,632	National Stage of	PCT/US99/23033	10/04/1999
09/806,632	An application claiming the benefit under 35 USC 119(e)	60/103,105	10/05/1998

Assignee Information

Assignee Name:: Advanced Imaging Systems, Inc.
City of mailing address:: Cleveland
State or Province of mailing address:: OH